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FARMLAND ASSESSMENT ACT QUESTIONNAIRE

Ownership: _____

Parcel Number(s): _____

Total Acres: _____ **Land Class is determined by survey conducted by the State of Utah.**

Type of livestock: _____ Number of animals: _____

Length of time grazed annually: _____ Dates of Use (ie May-July): _____

Is Dry Graze or Irrigated Pasture fully fenced: Yes No

Is gate locked: Yes No

Type of crop grown: _____ Yield per acre: _____

Is irrigation water available for all crops? Yes No

Beehive count: _____ Other production besides beehives: Yes No

Has the land been actively devoted to agricultural use for at least two (2) successive years immediately preceding the tax year in which application is requested? Yes No

Is property being leased? Yes No

If yes, lessee name and contact info: _____

Owner affirms and declares the above information is true and correct.

Signature of Property Owner

Property Owner Name (Please Print)

Date

Phone Number